

EXHIBIT "C"  
AFFIDAVIT

THE STATE OF Texas §

COUNTY OF Dallas §

I, Carolann Haggard, Artist, make this affidavit and hereby on oath state the following:

I, and/or a person or persons related to me, have the following interest in a business entity that would be peculiarly affected by the work or decision on the project (check all that apply);

☐ Ownership of 10% or more of the voting shares of the business entity.

☐ Ownership of \$2,500 or more of the fair market value of the business entity.

☐ Funds received from the business entity exceed 10% of my income for the previous year.

☐ Real property is involved and I have an equitable or legal ownership with a fair market value of at least \$2,500.

☒ None of the above.

☐ A relative of mine has substantial interest in the business entity or property that would be affected by my decision of the public body of which I am a member.

☐ Other: \_\_\_\_\_

Upon the filing of this affidavit with the City of Frisco, Texas, I affirm that no relative of mine, in the first degree by consanguinity or affinity as defined in Chapter 573 of the Texas Government Code, is a member of the public body which took action on the agreement.

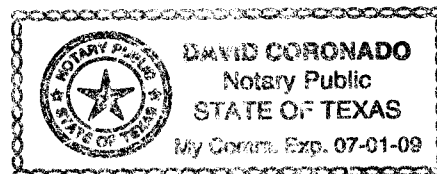
Signed this 4 day of January, 20 08

Carolann Haggard  
Signature of Official/Title

BEFORE ME, the undersigned authority, this day personally appeared Carolann Haggard and on oath stated that the facts hereinabove stated are true to the best of his/her knowledge or belief.

Sworn to and subscribed before me on this 4th day of January, 20 08.

Notary Public in and for  
The State of Tx  
My commission expires: 7-1-09



## EXHIBIT "D"

**CONFLICT OF INTEREST QUESTIONNAIRE****FORM CIQ**

For vendor or other person doing business with local governmental entity

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- 5** Name of local government officer with whom filer has affiliation or business relationship. (Complete this section only if the answer to A, B, or C is YES.)

This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the filer has affiliation or business relationship. Attach additional pages to this Form CIQ as necessary.

- A. Is the local government officer named in this section receiving or likely to receive taxable income from the filer of the questionnaire?

☐ Yes

☒ No

- B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the local government officer named in this section AND the taxable income is not from the local governmental entity?

☐ Yes

☒ No

- C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government officer serves as an officer or director, or holds an ownership of 10 percent or more?

☐ Yes

☒ No

- D. Describe each affiliation or business relationship.

- 6** Describe any other affiliation or business relationship that might cause a conflict of interest.

**7**

Carolyn Haggard  
Signature of person doing business with the governmental entity

1-4-08  
Date